

JAN 1 1 2001

PTO/SB/17 (09/00)

Approved for use through 10/31/2001. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**  
**For FY 2002**

Patent fees are subject to annual revision.

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> <b>-0-</b>
--------------------------------	------------------------

Complete If Known

Application Number	09/853,507
Filing Date	05/09/01
First Named Inventor	Weller, et al.
Examiner Name	Jones, D.L.
Group/Art Unit	1619
Attorney Docket No.	E-1507 CON

**METHOD OF PAYMENT** (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	02-1275
Deposit Account Name	Battelle Memorial Institute - PND

☒ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

☒ Applicant claims small entity status

2. Payment Enclosed: ☐ check ☐ Money Order ☐ Other

### FEE CALCULATION

### 1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Designing filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1)	(\$)	-0-
--------------	------	-----

## 2. EXTRA CLAIM FEES

	Extra Claims	Fee form below	Fee Paid
Total Claims <input type="text"/> - 20 ** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>	
Independent Claims <input type="text"/> - 3 ** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>	
Multiple Dependent <input type="text"/>	<input type="text"/>	= <input type="text"/>	

\*\*or number previously paid, if greater, For Reissues, see below

Large Entity	Small Entity			
Fee	Fee	Fee	Fee	Fee Description
Code	(\$)	Code	(\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid

109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)	(\$)	-0-
--------------	------	-----

**FEE CALCULATION (continued)**

### 3. ADDITIONAL FEES

Large Entity Small Entity				Fee Description	Fee Paid
Fee	Fee	Fee	Fee		
Code (\$)		Code (\$)			
105	130	205	65	Surcharge- late filing fee or oath	
127	50	227	25	Surcharge- late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within forth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Requesting for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive – unavoidable	
		141	1,280	241 640 Petition to revive – unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	224	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
Other fee (specify)					

**\*Reduced by Basic Filing Fee Paid**

SUBTOTAL (3)	(\$)	-0-
--------------	------	-----

## SUBMITTED BY

Name (*Print/Type*)

Stephen R. May

Registration No.

(Attorney/Agent)

29,255

Telephone

Complete (if applicable)

(509) 375-2387

Signature

Date \_\_\_\_\_

Q. 2. All 7000

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.